FEC

Only

STATEMENT OF

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ORGANIZATION FORM 1 Office Use Only NAME OF (Check if name Example: If typing, type 12FE4M5 COMMITTEE (in full) is changed) over the lines. Esther for Congress 801 Bend Blvd ADDRESS (number and street) Apt 313 (Check if address is changed) East Moline 61244 CITY A STATE A ZIP CODE ▲ COMMITTEE'S E-MAIL ADDRESS estherking@pdscompliance.com (Check if address is changed) Optional Second E-Mail Address admin@pdscompliance.com COMMITTEE'S WEB PAGE ADDRESS (URL) www.estherforcongress.com (Check if address is changed) DATE 2022 C00716498 FEC IDENTIFICATION NUMBER 3. X IS THIS STATEMENT NEW (N) OR AMENDED (A) I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete. Kilgore, Paul, , , Type or Print Name of Treasurer Kilgore, Paul, , , [Electronically Filed] 08 2022 Signature of Treasurer Date NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 52 U.S.C. §30109. ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS. Office For further information contact: FEC FORM 1 Federal Election Commission Use (Revised 06/2012)

Toll Free 800-424-9530

Local 202-694-1100

FEC Form 1 (Revised 03/2022)	Page 2
TYPE OF COMMITTEE:	
Candidate Committee:	
(a) This committee is a principal campaign committee. (Complete the candidate information below.)	
(b) This committee is an authorized committee, and is NOT a principal campaign committee. (Compleinformation below.)	ete the candidate
Name of Candidate King, Esther, Joy, ,	
Candidate Party Affiliation REP Sought: House Senate President	State IL District 17
(c) This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Name of Candidate	
Party Committee:	
(Mational, State (Demo	ocratic, llican, etc.) Party
Political Action Committee (PAC):	
(e) This committee is a separate segregated fund. (Identify connected organization on line 6.) Its con	nected organization is a:
Corporation Corporation w/o Capital Stock Lat	bor Organization
Membership Organization Trade Association Co	operative
In addition, this committee is a Lobbyist/Registrant PAC.	
(f) This committee supports/opposes more than one Federal candidate, and is NOT a separate segre committee. (i.e., nonconnected committee)	egated fund or party
In addition, this committee is a Lobbyist/Registrant PAC.	
In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)	
(g) This committee is an independent expenditure-only political committee (Super PAC).	
In addition, this committee is a Lobbyist/Registrant PAC.	
(h) This committee is a political committee with both contribution and non-contribution accounts (Hybridian Accounts)	rid PAC).
In addition, this committee is a Lobbyist/Registrant PAC.	
Joint Fundraising Representative:	
(i) This committee collects contributions, pays fundraising expenses and disburses net proceeds for to committees/organizations, at least one of which is an authorized committee of a federal candidate	•
(j) This committee collects contributions, pays fundraising expenses and disburses net proceeds for to committees/organizations, none of which is an authorized committee of a federal candidate.	two or more political
Committees Participating in Joint Fundraiser	
1	

	FEC Form 1 (Revised 0	2/2009)	Page 3
V	/rite or Type Committee Name		1911
	Esther for Con	gress	
6.	Name of Any Connected O	ganization, Affiliated Committee, Joint Fundraising Representative, or Le	eadership PAC Sponsor
	Mailing Address	824 S MILLEDGE AVE	
		SUITE 101	
		ATHENS GA 3	0605
		CITY ▲ STATE ▲	ZIP CODE ▲
	Relationship: Connected	Organization Affiliated Organization Joint Fundraising Representative	Leadership PAC Sponso
7.	Custodian of Records: Identibooks and records.	fy by name, address (phone number optional) and position of the person in po	essession of committee
	Kilgore, Pa	ıl	
	Full Name		
	Mailing Address	824 S Milledge Ave Ste 101	1 1 1 1 1 1 1 1 1
		1	
		Athens GA 3	0605
		CITY ▲ STATE ▲	ZIP CODE ▲
	Title or Position ▼	STATE A	ZIF CODE A
	Treasurer	Telephone number	_ 534 7780
8.	Treasurer: List the name and any designated agent (e.g., a	d address (phone number optional) of the treasurer of the committee; and assistant treasurer).	the name and address of
	Full Name Kilgore, Pa	ıl, , ,	
	of Treasurer		
	Mailing Address	824 S Milledge Ave Ste 101	
		Athens GA 3	0605
		CITY ▲ STATE ▲	ZIP CODE ▲
	Title or Position ▼		
	Treasurer	Telephone number	_ 534 7780

FEC Form	(Revised 02/2009)	Pag	l ge 4
Full Name of Designated Agent	Goode, Michael, , ,		
Mailing Address	824 S Milledge Ave Ste 101		
	Athens	GA 30605	
Title or Position	CITY ▲	STATE ▲ ZIP COI	DE 🛦
Assistant Treasu	rer	one number 706 - 534 -	- 7780
	Depositories: List all banks or other depositories in which the xes or maintains funds.	committee deposits funds, holds account	ts, rents
Name of Bank, [Depository, etc.		
	EagleBank		
Mailing Address	7815 Woodmont Ave		
	Bethesda	MD 20814	
	CITY ▲	STATE ▲ ZIP COL	DE 🛦
Name of Bank, [Depository, etc.		
	Classic City Bank		
Mailing Address	2365 West Broad St		
	Athens	GA 30606	
	CITY ▲	STATE ▲ ZIP COL	DE 🛦

FEC Form 1S (Revised 02/2017)

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h). Joint Fundraisi		FEC ID number	C
1.		FEC ID number	C
2.			
3.		FEC ID number	С
4		FEC ID number	C
	Organization, Affiliated Committee, Joint Fundr	aising Representative	e, or Leadership PAC Spon
WINNING WOME	EN VICTORY COMMITTEE 2022		
Mailing Address	228 S. WASHINGTON ST.		
	STE. 115		
	ALEXANDRIA	, , VA	22314
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
		Fundraising Representa	Leadership PAC S
esignated Agent: Identi	Affiliated Committee	Fundraising Representa	Leadership PAC S
esignated Agent: Identi		Fundraising Representa	Leadership PAC S
esignated Agent: Identi		Fundraising Representa	Leadership PAC S
esignated Agent: Identi		Fundraising Representa	Leadership PAC S
esignated Agent: Identi	fy by name, address (phone number – optional)		
esignated Agent: Identi	fy by name, address (phone number – optional)		
esignated Agent: Identing Full Name	fy by name, address (phone number – optional) CITY CITY		
Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or m	fy by name, address (phone number – optional) CITY CITY Te pries: List all banks or other depositories in which aintains funds.	STATE A	ZIP CODE A
esignated Agent: Identification Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or mane of Bank, Truist	fy by name, address (phone number – optional) CITY CITY Te	STATE A	ZIP CODE A
esignated Agent: Identification Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or mane of Bank, Truist	fy by name, address (phone number – optional) CITY CITY Te pries: List all banks or other depositories in which aintains funds.	STATE A	ZIP CODE A
esignated Agent: Identification Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or maname of Bank, epository, etc.	fy by name, address (phone number – optional) CITY CITY Te pries: List all banks or other depositories in which aintains funds.	STATE A	ZIP CODE A
esignated Agent: Identification Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or maname of Bank, epository, etc.	fy by name, address (phone number – optional) CITY CITY Te pries: List all banks or other depositories in which aintains funds.	STATE A	ZIP CODE A

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(g) or (h	n). Joint Fundraisin	g Participant:		
	1.		FEC ID number	C
	2.		FEC ID number	С
	3.		FEC ID number	С
	4.		FEC ID number	С
_				
		Organization, Affiliated Committee, Joint Fundr	aising Representative	e, or Leadership PAC Sponsor
	FRIENDS OF GO	P WINNING WOMEN 2022		
	Mailing Address	228 S. WASHINGTON ST.		
		STE. 115		
		ALEXANDRIA	VA	22314
	Relationship:	CITY A	STATE ▲	ZIP CODE ▲
	Connected	d Organization	Fundraising Representa	ative Leadership PAC Sponso
. De	esignated Agent: Identify	by name, address (phone number – optional)		
. De	esignated Agent: Identify	by name, address (phone number – optional)		
. De		by name, address (phone number – optional)		
. De	Full Name	by name, address (phone number – optional)		
. De	Full Name	by name, address (phone number – optional)		
. De	Full Name	CITY A	STATE A	ZIP CODE A
. De	Full Name	CITY A		
Ba sat	Full Name Mailing Address TITLE OR POSITION anks or Other Depositor fety deposit boxes or ma	CITY CITY Te ries: List all banks or other depositories in which intains funds. pridge Bank	STATE ▲	ZIP CODE A
Ba sat	Full Name Mailing Address TITLE OR POSITION anks or Other Depositor fety deposit boxes or material mane of Bank, Chainb	CITY CITY Te ries: List all banks or other depositories in which intains funds.	STATE ▲	ZIP CODE A
Ba sat	Full Name Mailing Address TITLE OR POSITION anks or Other Depositor fety deposit boxes or material deposit boxes or material depository, etc.	CITY CITY Te ries: List all banks or other depositories in which intains funds. pridge Bank	STATE ▲	ZIP CODE A
Ba sat	Full Name Mailing Address TITLE OR POSITION anks or Other Depositor fety deposit boxes or material deposit boxes or material depository, etc.	CITY CITY Te ries: List all banks or other depositories in which intains funds. pridge Bank	STATE ▲	ZIP CODE A

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) or (h). Joint Fundraisin	y Participant		
) or (h). Joint Fundraisin o	, rancipant.	FEC ID number	C
2.		FEC ID number	C
3.		FEC ID number	C
4.		FEC ID number	С
4.			
	Organization, Affiliated Committee, Joint Fundrais	sing Representative	e, or Leadership PAC Sponsor
TEAM VALOR			
Mailing Address	824 S MILLEDGE AVE STE 101		
Mailing Address			
	ATHENS	ı GA ı	30605
Relationship:	CITY ▲	STATE A	ZIP CODE ▲
		undraising Representa	
Designated Agent: Identify Full Name	by name, address (phone number – optional)		
Mailing Address			
		_	
TITLE OR POSITION	▼ CITY ▲	STATE ▲	ZIP CODE ▲
	1	phone Number	
Banks or Other Depositor safety deposit boxes or ma	ies: List all banks or other depositories in which the	e committee deposit	s funds, holds accounts, rents
Name of Bank, Wells F Depository, etc.	Fargo Bank		
Mailing Address	8302 Woodmont Avenue		
	1		
	Bethesda	MD	20814

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n). Joint Fundraisin ç	Participant:		0
1.		FEC ID number	C
2		FEC ID number	C
3.		FEC ID number	C
4.		FEC ID number	С
ame of Any Connected	Organization, Affiliated Committee, Joint Fundi	raising Representative	e, or Leadership PAC Spor
TAKE BACK THE	HOUSE 2022		
Mailing Address	PO BOX 30844		
	BETHESDA	MD MD	20824
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
Connected		t Fundraising Representa	Leadership PAC S
	by name, address (phone number – optional)	t Fundraising Representa	Leadership PAC S
esignated Agent: Identify		t Fundraising Representa	Leadership PAC S
esignated Agent: Identify Full Name		t Fundraising Representa	Leadership PAC S
esignated Agent: Identify Full Name			Leadership PAC S
esignated Agent: Identify Full Name Mailing Address	by name, address (phone number – optional)		
esignated Agent: Identify Full Name	by name, address (phone number – optional) CITY		
Full Name Mailing Address TITLE OR POSITION anks or Other Depositor fety deposit boxes or mail	by name, address (phone number – optional) CITY CITY Teles: List all banks or other depositories in which	STATE A	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION anks or Other Depositor fety deposit boxes or main arme of Bank, expository, etc.	by name, address (phone number – optional) CITY CITY Teles: List all banks or other depositories in which ntains funds.	STATE A	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION Anks or Other Depositor fety deposit boxes or mail	by name, address (phone number – optional) CITY CITY Teles: List all banks or other depositories in which ntains funds. Bank & Trust	STATE A	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION anks or Other Depositor fety deposit boxes or main arme of Bank, expository, etc.	by name, address (phone number – optional) CITY CITY Teles: List all banks or other depositories in which ntains funds. Bank & Trust	STATE A	ZIP CODE A

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h). Joint Fundraisi	ig raiticipant.		
1.		FEC ID number	C
2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	С
	Organization, Affiliated Committee, Joint Fund	• .	e, or Leadership PAC Spon
Mailing Address	PO BOX 30844		
	BETHESDA	MD	20824
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
		t Fundraising Represent	ative Leadership PAC S
	Affiliated Committee Joint by by name, address (phone number – optional)	t Fundraising Represent	ative Leadership PAC S
esignated Agent: Identi		t Fundraising Represent	Leadership PAC S
esignated Agent: Identi		t Fundraising Represent	Leadership PAC S
esignated Agent: Identi		t Fundraising Represent	Leadership PAC S
esignated Agent: Identi	by by name, address (phone number – optional)	t Fundraising Represent	Leadership PAC S
esignated Agent: Identing Full Name	by by name, address (phone number – optional) CITY		
Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or mane of Bank,	cy by name, address (phone number – optional) CITY CITY Topries: List all banks or other depositories in which	STATE A	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or mane of Bank,	cy by name, address (phone number – optional) CITY CITY Topries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identification Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or mane of Bank, epository, etc.	cy by name, address (phone number – optional) CITY CITY Topries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identification Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or mame of Bank, epository, etc.	cy by name, address (phone number – optional) CITY CITY Topries: List all banks or other depositories in which	STATE A	ZIP CODE A

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g(g)or(h). Joint Fundraisi n	ng Participant:		
1		FEC ID number	C
2		FEC ID number	C
3.		FEC ID number	С
4.		FEC ID number	C
Name of Any Connected	Organization, Affiliated Committee, Joint Fundrai	ising Representativ	e, or Leadership PAC Sponsor
Mailing Address	824 S MILLEDGE AVE.		
	ATHENS	ı GA ı	30605
Deletionship			
Relationship:	CITY ▲ d Organization	STATE ▲ Fundraising Represent	ZIP CODE ▲ ative Leadership PAC Sponsor
Full Name	y by name, address (phone number – optional)		
Mailing Address			
TITLE OR POSITION	▼ CITY ▲	STATE ▲	ZIP CODE ▲
		ephone Number	
Banks or Other Deposito safety deposit boxes or many Name of Bank, Depository, etc.	ries: List all banks or other depositories in which thaintains funds.	ne committee deposit	s funds, holds accounts, rents
Mailing Address			
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Banks or Other Depositors safety deposit boxes or many Name of Bank, Depository, etc. Mailing Address	ries: List all bank	CITY A s or other depositories in w	Telephone Nu			ZIP CODE ds accounts, rents
Banks or Other Depositors safety deposit boxes or many Name of Bank, Depository, etc.	ries: List all bank		Telephone Nu	mber		
Banks or Other Deposito safety deposit boxes or management of Bank,	ries: List all bank		Telephone Nu	mber		
Banks or Other Deposito	ries: List all bank		Telephone Nu	mber		
			Telephone Nu	mber		
TITLE OR POSITION	▼	CITY A			Z - [ZIP CODE A
TITLE OR POSITION	\	CITY A	S	TATE A	Z	ZIP CODE ▲
			<u> </u>	1 . 1		
Mailing Address						
Full Name						
	y by name, addres	ss (phone number – option	al)			
Connecte	d Organization	Affiliated Committee	Joint Fundraising	Representa	tive L	eadership PAC Spon
Relationship:		CITY A		STATE A		ZIP CODE ▲
	AUSTIN		1	TX	78734	_
Mailing Address	PO BOX 34102	? / 				
Name of Any Connected		filiated Committee, Joint F	Fundraising Rep	esentative	, or Leader	ship PAC Sponsor
4.			FEC ID	number	C	
			FEC ID		С	
3.			FEC ID	number	С	
2						